



(Copy for OCRG)

Form No. 102  
January 1993

(To be accomplished in quadruplicate)

REMARKS/ANNOTATION

Republic of the Philippines  
OFFICE OF THE CIVIL REGISTRAR GENERAL  
CERTIFICATE OF LIVE BIRTH

(Fill out completely, accurately and legibly. Use ink or typewriter.  
Place X before the appropriate answer in items 2, 5a, 5b and 19a.)

Province Cebu Registry No. 2000 - 518  
City/Municipality Cardova

1. NAME (First) (Middle) (Last)  
ATRIEL MIANO TAMPUS

2. SEX 1 Male 2 Female  
3. DATE OF BIRTH (day) (month) (year)  
18 August 2000

4. PLACE OF BIRTH (Name of Hospital/Clinic/Institution/ (City/Municipality) (Province)  
House No., Street, Barangay)  
Calan Cardova Cebu

5a. TYPE OF BIRTH 1 Single 2 Twin 3 Triplet, etc.  
b. IF MULTIPLE BIRTH, CHILD WAS 1 First 2 Second 3 Others, Specify

c. BIRTH ORDER (live births and fetal deaths including this delivery) (first, second, third, etc.) 3rd  
d. WEIGHT AT BIRTH 3175 grams

6. MAIDEN NAME (First) (Middle) (Last)  
SUSAN MIANO TAMPUS

7. CITIZENSHIP Filipino 8. RELIGION Roman Catholic

9a. Total number of children born alive: 03  
b. No. of children still living including this birth: 03  
c. No. of children born alive but are now dead: 00

10. OCCUPATION Factory Worker 11. Age at the time of this birth: 34 years

12. RESIDENCE (House No., Street, Barangay) (City/Municipality) (Province)  
Calan Cardova Cebu

13. NAME (First) (Middle) (Last)  
N/A

14. CITIZENSHIP N/A 15. RELIGION N/A

16. OCCUPATION N/A 17. Age at the time of this birth: N/A years

18. DATE AND PLACE OF MARRIAGE OF PARENTS (If not married, accomplish Affidavit of Acknowledgment/Admission of Paternity at the back.)

19a. ATTENDANT N/A  
1 Physician 2 Nurse 3 Midwife  
4 Healer (Traditional Midwife) 5 Others (Specify)

19b. CERTIFICATION OF BIRTH  
I hereby certify that I attended the birth of the child who was born alive at 8:20 P.M. o'clock am/pm on the date stated above.

Signature [Signature] Address Cardova, Cebu  
Name in Print YILOHENA BAGUIO Date August 21, 2000  
Title or Position Midwife

20. INFORMANT  
Signature [Signature] Address Cardova, Cebu  
Name in Print SUSAN TAMPUS Date August 21, 2000  
Relationship to the child MOTHER

21. PREPARED BY  
Signature [Signature]  
Name in Print ANNABELLE A. TANCO  
Title or Position MCR  
Date August 21, 2000

22. RECEIVED AT THE OFFICE OF THE CIVIL REGISTRAR  
Signature [Signature]  
Name in Print ANNABELLE A. TANCO  
Title or Position MCR  
Date August 21, 2000

For OCRG USE ONLY:  
Population Reference No. 2000-518

TO BE FILLED UP AT THE OFFICE OF THE CIVIL REGISTRAR

41	0	5	1			
48	1					
49	1	6	6	0	0	
55	0	0	0	0		
61	1					
62	6	2	3	1	7	5
63	1	1				
70	1	1	3	6	6	
72						
74						
76						
78						
81						
86						
87						
88						
89						
91						
93						
94						

000262

04839-D0-400JSA-01027-B1001

BEST POSSIBLE IMAGE



T400048394000102704012013001  
B1200603565

BReN  
02220-B00R02-5

Documentary  
Stamp Tax Paid

[Signature]  
CARMELITA N. ERICTA  
Administrator and Civil Registrar General  
National Statistics Office